

Link Between Quiet Voice and Cardiac Problems Due to Diminished Lung Inflation Secondary to Pericarditis

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Recent studies indicate that there is a strong statistical correlation between sudden decreases in the volume of an individual's voice and sudden death due to cardiac failure.

This correlation may be attributable to diminished lung inflation secondary to pericarditis. The accumulation of fluids around the heart could be predicted to prevent the complete inflation of the lungs without concerted effort. As breathing is autonomic, the level of effort put forth into breathing is constant unless a conscious effort is made to exert a greater effort.

Some length of time is required for lungs (or any balloon filled with air, for that matter,) to inflate and this length of time varies depending upon the surrounding pressure. When pressure is higher, it takes a greater length of time for the lungs to fill with air, as well as a greater length of time for the lungs to empty themselves of air.

The accumulation of fluids around the heart would also have an effect upon lung inflation times, all things being equal. When inflation of the lungs is partial, the human autonomic breathing system compensates by exhaling more slowly while speaking in order to allow for speech to be sustained over a greater length of time (similar to a trumpet player holding a long note.) The trade-off is that the reduced rate of exhalation results in a quieter volume.

Given that there may well be a causative mechanism at work in the phenomenon of speaking voices becoming weaker with the onset of certain cardiac maladies, this quiet voice should be treated as a symptom rather than a coincidental change.